

KANSAS DEPARTMENT OF HEALTH AND ENVIRONMENT
2015 Annual Report



Message from the Secretary

Great advancements were made for the health and environment of Kansans during 2015.

I am very proud to say that materials for state health department accreditation were submitted to the Public Health Accreditation Board on December 31. KDHE has been working towards becoming an Accredited Public Health Department since 2013. Upon receiving Accreditation after a 2016 site visit, KDHE will join 12 other accredited state health departments in the United States.

This past year, vaccines captured by schools in KSWebIZ reached over 1 million students. The accuracy and completeness of these records can facilitate our ability to target vaccine resources to underserved areas. The Bureau of Health Promotions developed a statewide Diabetes Primary Prevention network in 2015. Several communities are now offering classes to help Kansans who have been diagnosed with prediabetes or are at risk for diabetes. This network will help to prevent people from developing diabetes.

The Bureau of Water completed many nutrient reduction efforts in 2015 including nonpoint source management controlling runoff. The Bureau also incorporated equitable nutrient reduction requirements in wastewater permits, resulting in a significant reduction in nutrients from wastewater discharges.

The KanCare program, which provides Medicaid services to more than 400,000 Kansans, has completed the second year of implementation. Since moving to managed care, Kansas has seen a reduction in emergency room visits, an increase in primary care physician visits and an increase in dental services provided to people enrolled in KanCare. Kansas is taking better care of these individuals by getting them the right care, in the right place, at the right time.

This annual report provides only the highlights from a long list of accomplishments KDHE programs recorded in 2015. For the latest information on all KDHE's services, visit us at kdheks.gov.

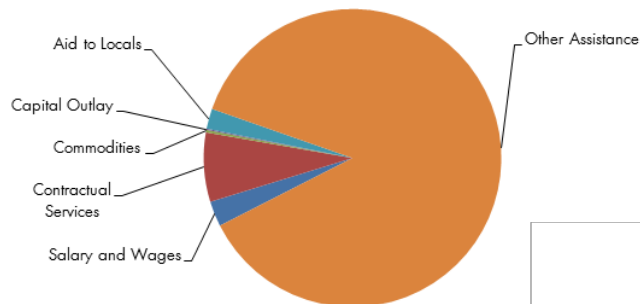
Susan Mosier, M.D., MBA, FACS
Secretary of the Kansas Department of Health and Environment

Financials

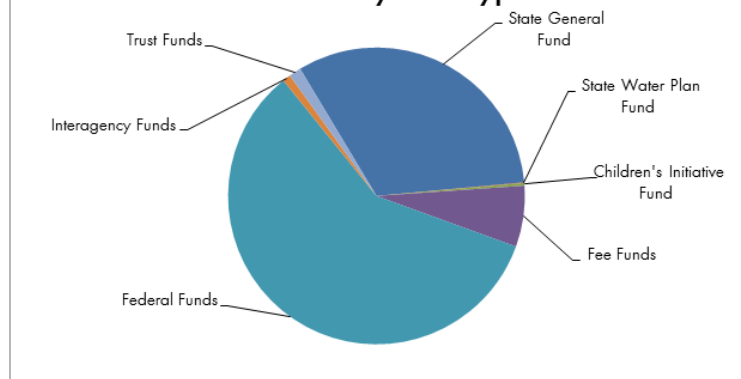
FY 2015 Expenses by FUND					
FUND TYPE	ADMINISTRATION	PUBLIC HEALTH	HEALTH CARE FINANCE	ENVIRONMENT	TOTAL AGENCY
STATE GENERAL FUND	4,106,208	16,959,225	741,173,040	5,190,374	767,428,847
STATE WATER PLAN FUND	-	-	-	1,754,024	1,754,024
CHILDRENS INITIATIVES FUND	-	7,129,050	-	-	7,129,050
AGENCY FEE FUNDS	10,934,396	7,716,766	125,543,880	14,465,318	158,660,360
FEDERAL FUNDS	2,146,465	126,437,803	1,256,517,128	15,394,623	1,400,496,019
INTERAGENCY FUNDS	151,696	-	20,801,399	-	20,953,095
AGENCY TRUST FUNDS	323,288	899,347	11,169,589	19,054,362	31,446,586
TOTAL	\$ 17,662,053	\$159,142,191	\$ 2,155,205,036	\$ 55,858,701	\$2,387,867,981

FY 2015 Expenses by EXPENDITURE					
FUND TYPE	ADMINISTRATION	PUBLIC HEALTH	HEALTH CARE FINANCE	ENVIRONMENT	TOTAL AGENCY
SALARIES & WAGES	6,450,541	19,161,423	13,125,477	26,901,725	65,639,166
CONTRACTUAL SERVICES	10,158,796	27,573,093	122,620,739	19,024,730	179,377,358
COMMODITIES	57,670	1,538,818	2,129,470	2,634,065	6,360,023
CAPITAL OUTLAY	515,106	560,410	1,413,462	642,075	3,131,053
AID TO LOCALS	-	38,687,353	10,367,030	3,251,945	52,306,328
OTHER ASSISTANCE	479,940	71,621,094	2,005,548,858	3,404,161	2,081,054,053
TOTAL	\$ 17,662,053	\$159,142,191	\$ 2,155,205,036	\$ 55,858,701	\$2,387,867,981

FY 2015 by Expenditure Type

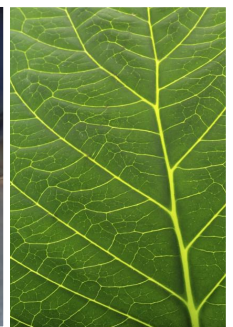


FY 2015 by Fund Type



OUR MISSION

To protect and improve the health and environment of all Kansans.

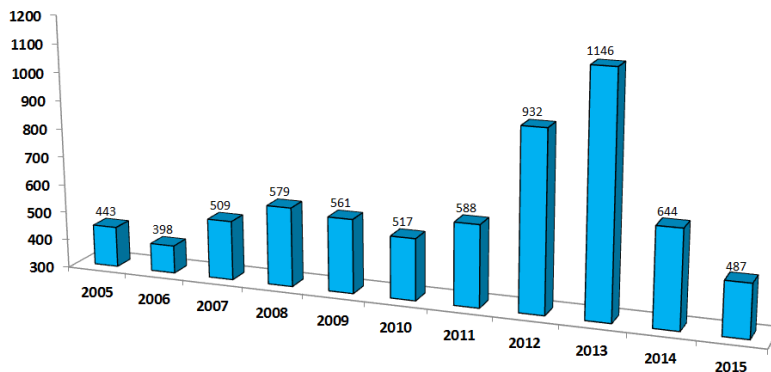


Healthy Kansans living in safe and sustainable environments. **OUR
VISION**

Promoting healthy environmental practices in a growing economy

Division of Environment has facilitated an increase of business activity in the State with new construction projects and business expansion at current industrial sites.

Air Construction Permit Documents Issued to Industry



The Bureau of Air has been able to keep permit approval turnaround times as short as possible.

The Bureau of Air (BOA) works with the aviation and energy development

sectors to promote growth in the Kansas economy. Keeping these industries up to date on impending regulations and working with them to help expand their facilities is a top priority for the Bureau. BOA also works with the Governor and the Attorney General to prevent the negative impacts of intrusive federal government regulations. The Bureau has assisted the Attorney General's office in the filing of lawsuits that have been heard in the Supreme Court.

Kansas has experienced a reduction in air pollutants that impact human health. This decrease can only enhance the health and well-being of all Kansans.

In 2015, BOA:

- Online permitting put in place for sources of air pollution.
- With exception of an area of less than a square mile in Saline County, Kansas has no nonattainment areas with the National Ambient Air Quality Standards.
- All documents within the Bureau have been scanned and indexed for easy referencing.

Maintaining clean water for all Kansans

The foremost goal of the Bureau of Water (BOW) is to **reduce nutrient pollution in Kansas waters**. Currently, 96 percent of all Public Water Supply customers receive water that meets state and federal drinking water requirements. The remaining four percent generally reside in very small communities that are struggling to afford needed upgrades, and BOW will use quality improvement tools to examine the best ways to assist these suppliers in complying with requirements.

Nutrient pollution is the cause of blue green algae

(BGA) blooms in reservoirs and biological impairments in flowing waters. Blue-green algae blooms impact local tourism, increase costs for drinking water facilities to remove BGA toxins as well as taste and odor problems caused by algae. BGA blooms have been directly attributed to deaths of livestock and pets. Nutrient pollution reduction efforts are coordinated through the Watershed Restoration and Protection Strategy (WRAPS) local watershed groups.



2015 BOW Nutrient Reduction Efforts:

- **Nonpoint source management** controlling nutrient runoff, coordinated through the **Watershed Restoration and Protection Strategy (WRAPS)** local watershed groups.
- Incorporation of equitable nutrient reduction requirements in wastewater permits, resulting in a **significant reduction in nutrients from wastewater discharges**.
- Maintaining Kansas' **robust surface water monitoring network**,

BOW is the lead among multiple state agencies in **coordinating and implementing the state Nutrient Reduction Strategy** signed by the agency heads for KDHE, Kansas Department of Agriculture, Kansas Water Office and the Kansas Department of Wildlife Parks and Tourism.

Reducing landfill usage and finding alternatives to waste

The Municipal Solid Waste (MSW) recycling rate and the per capita disposal rate demonstrate that **steady improvements** have been made in **reducing waste** across Kansas. However, **over four pounds per person is still disposed each day** (a total of over two million tons per year), which shows the need for a thorough and attentive permitting and inspection program to ensure that waste is being properly managed.

The Bureau of Waste Management (BWM) seeks to **minimize burdens and costs** associated with providing waste management and recycling services by limiting permitting requirements and by **technical training and guidance** to facility operators.

Without mandates, Kansans have responded to increase the **recycling rate from 14**

percent to about 33

percent over the past ten years, making the per capita disposal rate 4.07. Currently, approximately one million tons of MSW is diverted from landfills each year, saving valuable natural resources, energy, and landfill space.

During 2015, BWM

- Worked with the coal-burning electric utilities of Kansas to **modify solid waste permits for the processing and disposal of coal combustion residuals** in accordance with new federal regulations and developed a compliance monitoring program related to these new requirements.
- Coordinated efforts with other bureaus to gather information to be used to **develop new regulations related to the disposal of waste containing naturally occurring radioactive material (NORM)** in on-site oil and gas pits and other permitted solid waste landfills.
- Developed new guidelines related to long-term post-closure care at closed municipal solid waste landfills **including requirements for maintaining financial assurance to cover the**

Supporting Community Health Systems

The Bureau of Community Health Systems works directly with health care and public health providers to build and sustain Kansas' local and

Program (SLRP) assists with the recruitment of providers to these shortage areas by providing educational loan repayment assistance. Primary care health providers receive

counselors. Eligible practice sites must be public or nonprofit agencies maintaining an open door to all residents, regardless of their ability to pay or their payment source. The Kansas SLRP receives state and federal financial support **providing \$300,000 in awards annually**. State support for the Kansas SLRP is matched federally by the Health Resources and Services Administration. Since 2010, the Kansas SLRP has provided **educational loan assistance to 39 providers** across Kansas bringing health professional services to shortage areas.

The health sector plays a direct role in the state's economy:

- Employs **12 percent** of all job holders in the state.
- Generates over **\$12 billion** in total income.
- More than **\$21 billion** in total sales annually.

(Source: January 2015, Office of Local Government, KSU Research and Extension)

regional health system infrastructure.

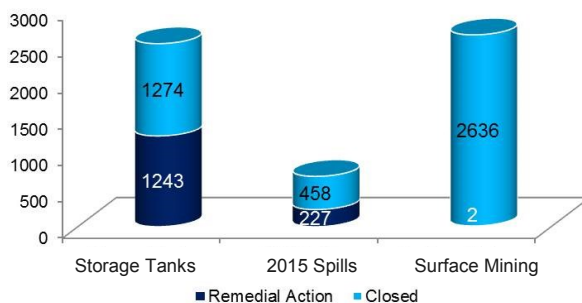
More than 90 percent of Kansas counties are federally designated as health professional shortage areas. Ninety-six counties have a primary care and/or dental health professional shortage, while 101 counties have a mental health professional shortage. The Kansas State Loan Repayment

assistance with the repayment of their qualified educational loans in exchange for a minimum two-year commitment to provide health care services at an eligible practice site in a shortage area. Eligible professions include primary care physicians, nurse practitioners, physician assistants, dentists, dental hygienists, and clinical professional

Remediating contamination to protect health and the environment

The primary goal of the Bureau of Environmental Remediation (BER) is to protect the health of Kansans and to preserve one of the most **important natural resources - our water supply**, both groundwater and surface water, from environmental contamination.

2015 Remedial Activities



BER regulates **more than 3,200** environmentally contaminated sites and oversees remedial actions taken by the parties responsible for the contamination. BER **works in cooperation with businesses** to ensure a careful balance of protecting the public health and natural resources of the state, while striving to minimally impact public

and private sector business functions.

BER programs **promote a growing economy** through the redevelopment and reuse of underutilized property by assisting landowners, purchasers, developers, realtors and lenders.

BER operates several programs that assist property owners to assess or **improve the environmental conditions** of their property, which can ultimately promote redevelopment and/or facility upgrade or

In 2015 BER's programs:

- Responded to a perchloroethylene (PCE) **groundwater contamination emergency** in Wichita, where two former dry cleaning facilities contaminated groundwater.
- Performed an **emergency response to cleanup** a spill of 1900 gallons of gasoline from the Riverton Quick Shop to **prevent contamination** from reaching the Spring River.
- Worked with the RACER Trust and NorthPoint Development to **cleanup contamination** at the Former GM Fairfax Plant 1 Site in the Fairfax

Providing Laboratory Testing and Support

The Kansas Health and Environmental Laboratories (KHEL) provide both clinical and environmental laboratory services to many programs within KDHE and

During 2014 Kansas Health and Environmental Laboratories have:

- Performed over 45,000 screening tests for children.
- Performed over 50,000 drinking water tests for public water systems.
- Certified over 3,000 clinical and environmental laboratories in Kansas.
- Trained and certified over 400 law enforcement officers in breath alcohol testing.

facilities throughout the state.

The clinical services include screening new babies for possible harmful disorders, performing other clinical tests in support of various state and local programs as well as supporting local health departments, hospitals and the state epidemiology programs with disease or outbreak investigations. The Environmental services provided include testing most of the community water systems in the state to ensure safe drinking water and supporting cleanup and monitoring activities for environmental contamination.

In 2014, the laboratory continued to enhance communications and services to its various customers by expanding utilization of the Laboratory Information Management System (LIMS) and continued to improve laboratory performance with staffing and workflow improvements. In addition to the testing services, KHEL is responsible for clinical and environmental laboratory certifications throughout the state. KHEL will continue to expand the communication and relationships with its customers as well as increasing testing support services as



Fielding a return on investments for our environmental practices

The Bureau of Environmental Field Services (BEFS) provides services to the other four bureaus in the division of Environment. Regular compliance inspections serve to protect the health of the environment and citizens of the state.

Through visits to permitted facilities, BEFS district staff are able to provide technical

In 2015, BEFS:

- Responded to hundreds of citizen concerns, as well as technical assistance requests from business and permitted facilities.
- Assisted businesses with mitigation of spills and releases throughout the state, protecting the health of citizens and the environment.

advice and compliance assistance to permitted facilities.

BEFS works to ensure consistency in regulatory compliance, assisting both industry and municipalities with economic certainty, and developing strategies to incorporate new inputs into existing or expanding infrastructure. By maintaining a level regulatory playing field, assisting with compliance, and by helping business understand regulations which apply to their industry, the risk of starting new ventures is lowered. With each new business, private sector employment is enhanced. BEFS staff are trained to ensure consistency in compliance inspections and to provide compliance assistance whenever possible.



BEFS staff have also responded to and investigated blue-green algae reports from local lake managers and the public since 2010. During the 2015 sampling season (April 1—Oct 31), more than 220 samples were taken from 25 lakes across the state. During the past five years, BEFS investigations into reports of harmful algae blooms have resulted in the collection of over 1,100 samples.

2015 Public Health Investigations

The Bureau of Epidemiology and Public Health Informatics (BEPHI) maintains trained epidemiologists who provide expertise and technical assistance to local public health departments, private health professionals and the public on a variety of health issues. Work centers around a wide range of activities to assess and reduce risks for the spread of infectious and zoonotic diseases, environmental exposures detrimental to health and traumatic injury in Kansas. In addition, vital event records are filed and issued to the public and health statistics are disseminated to facilitate local and state community health assessment.

BEPHI conducted 111 public health investigations in 2015:

- 37 outbreaks of vaccine-preventable diseases.
- 71 gastrointestinal illness outbreaks including pathogens spread through contaminated animal contact, food, water or from person-to-person.
- 20 investigations conducted because of environmental or other concerns.

Listeria Investigation Leads to Identification of Contaminated Ice Cream

During 2014 and early 2015, the Infectious Disease Response Section of BEPHI investigated a cluster of listeriosis cases all having hospitalizations at the same hospital prior to onset of illness. This outbreak was associated with consuming shakes made with ice cream from Blue Bell Creameries. Examining hospital food history logs for the patients was crucial to identifying a common food exposure. Multiple strains of *Listeria monocytogenes* from routine product sampling matched the PFGE patterns of the human isolates in Kansas and helped to identify the cause of this outbreak. This along with positive product that was collected from the hospital by KDHE led to the recall of multiple contaminated ice cream products from two Blue Bell Creamery facilities.

Reducing Missed Opportunities & Increasing HPV Vaccination Coverage

KDHE began a collaborative pilot project with all local health departments (LHDs) in 2015 to reduce missed opportunities, increase HPV vaccination coverage and to help foster LHD collaboration. The number of visits where children received all three recommended adolescent vaccines was 2,640 in 2014 and 3,283 in 2015, a 24 percent increase. In 2014, 3,873 children received their first dose of HPV. In 2015, 4,498 received their first dose of HPV; a 16 percent increase. These trends were similar for both males and females. This project was successful at decreasing missed opportunities and increasing the number of children receiving the HPV vaccine, providing adolescents protection against vaccine preventable diseases and cancers.

Screenings were provided to one-third of the students enrolled in grades K-12 in Kansas public schools. Over 4,100 of students screened demonstrated the need for urgent care.

Oral health screenings provide the state with county level data on the prevalence of dental caries, dental sealants and urgent care needed among Kansas children grades K-12. The School Sealant Program provided 5,560 children with a total of 20,399 sealants placed for the 2014-15 school year. In addition 16,190 prophylaxis and 20,399 fluoride varnish treatments were performed.

Dental Association and the Delta Dental Foundation/ Corporation to increase funding and tuition reimbursement for Kansas students to attend dental school and increase the awareness of the need for providers in underserved areas across the state.

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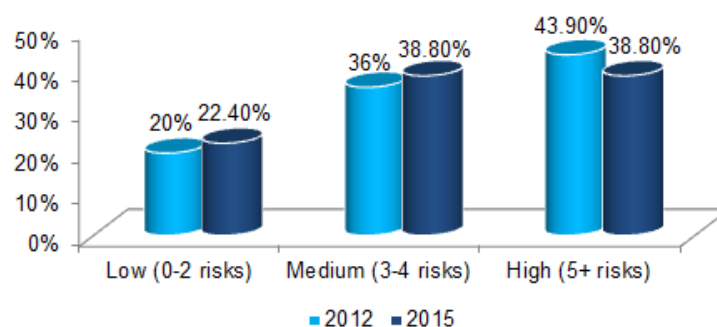
More employees moving to low-risk category in State Employee Health Plan

The State Employee Health Plan (SEHP) reports since 2012 through the end of the 2015 program year there has been a reduction of 5.1 percent in the high risk cohort population. The low risk cohort population has seen an increase of 2.3 percent over this same time period. This trend indicates this cohort population had a positive improvement in their health status.

With a favorable risk trend over the last three years and a continued future favorable trend, this will result in cost savings for the State and the employee over time, and will be a direct cause in the reduction of the medical services trend.

Additionally, enrollment in the High Deductible Health Plan with a Health Savings Account increased enrollment by approximately 25 percent for Plan Year 2015. The increase in enrollment for this plan will result in savings to the State and better health care management by the individual member.

**Risk Factor Distribution:
2012-2015 Population**

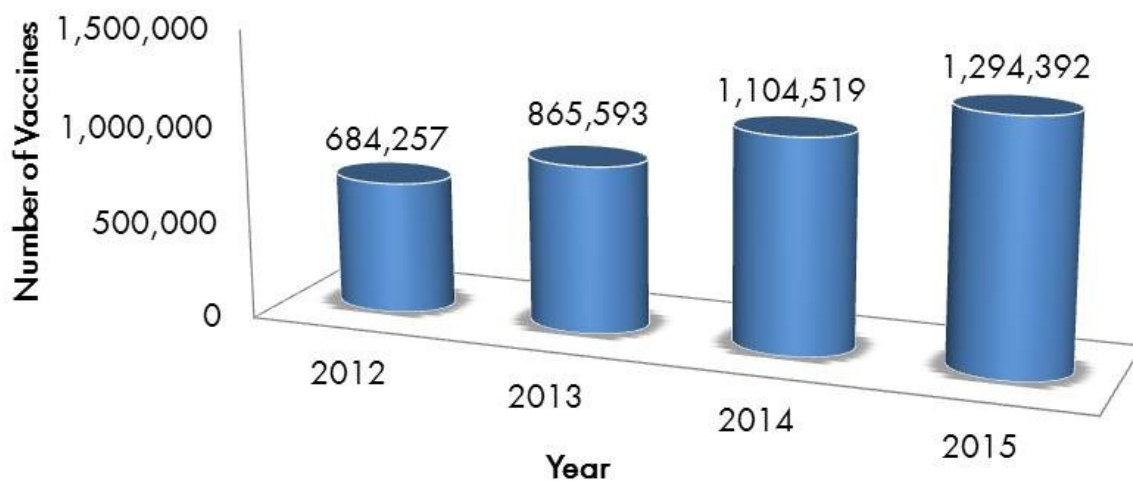


Enhanced data for vaccination of Kansas children

Children who have received all of the recommended and required immunizations are less likely to contract vaccine preventable diseases. The **Kansas Immunization Program** works to ensure that as many children as possible are **immunized against vaccine preventable diseases** so they can have healthy and productive lives.

Vaccines captured by schools in KSWebIZ **reached over 1 million** in 2015 with a total of 1,294,392 vaccines entered as of December 31, 2015. School personnel provide data that result in more complete immunization histories for children. The accuracy and completeness of these records can also facilitate our ability to target resources to underserved areas. The inclusion of immunization data captured by schools helps to enable **KSWebIZ** to meet the Kansas Healthy People 2020 objective: Increase the percentage of children less than 6 years of age whose immunization records are in a fully operational, population-based immunization information system (IIS) to 95 percent.

Vaccinations Captured in KSWebIZ by schools



KanCare Improving outcomes for members, slowing the costs of Medicaid

Since January 2013 KanCare has provided the **right care, at the right time, in the right place** to more than 400,000 Kansans who receive medical services through the joint federal-state Medicaid program. By providing **better coordinated services** and **improving the health outcomes** of these Kansans, the projected cost growth of KanCare has been reduced.

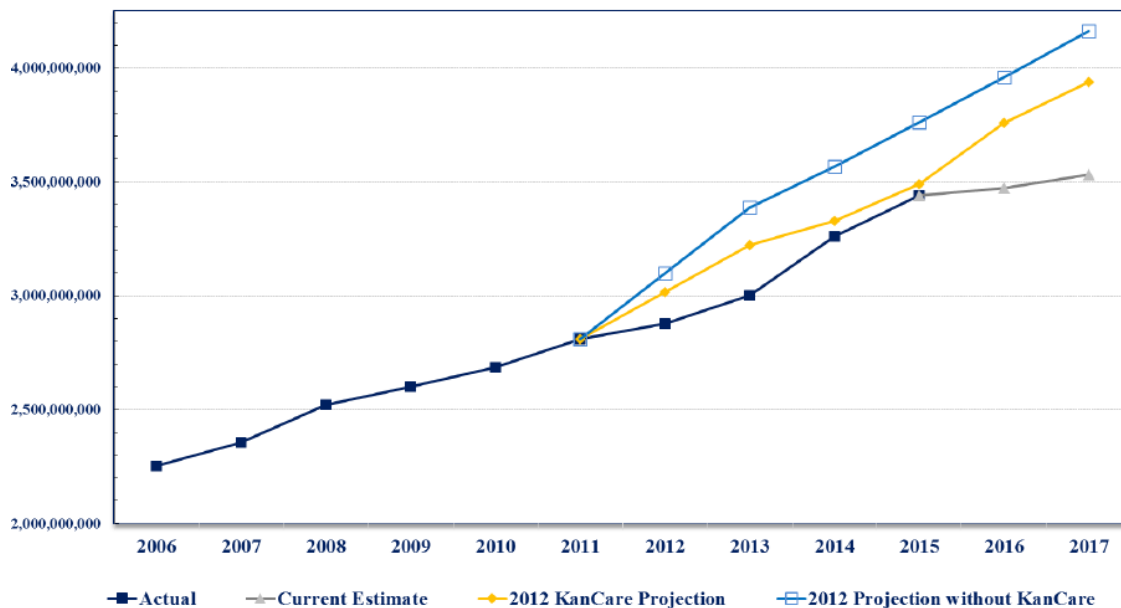
KDHE anticipates that costs associated with KanCare will be driven lower than initially projected through 2017.

In 2015, KanCare:

- Reduced the number of Emergency Room visits.
- Increased the number of Primary Care Physician visits.
- Began working towards an integrated Home- and Community- based service waiver that would reduce silos of care.

KanCare Cost Comparison

CY 2006 - CY 2017



Kansas Radon Program: Promoting testing to protect families

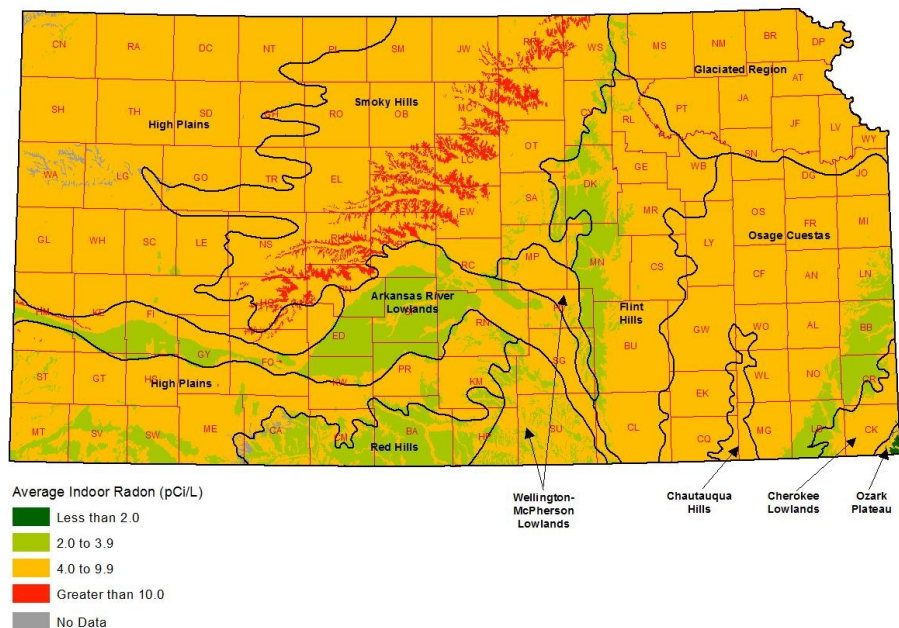
The **Kansas Radon Program** performs outreach and education to the citizens of Kansas on the harmful effects of radon gas, how to test for it, and how to repair structures to mitigate the health threat posed by radon gas. Radon is a tasteless, odorless, colorless, naturally occurring radioactive gas found in nearly all soils which comes from the breakdown of uranium. Outdoors, radon is diluted to low concentrations, but once inside an enclosed space, radon can accumulate to significant levels. Radon is the **first leading cause of lung cancer** in people who have never smoked and is **estimated to cause over 200 lung cancer deaths** in Kansas every year.

During 2014, KDHE sought to better understand the prevalence of radon in housing across the state. Through a statewide partnership and public outreach campaign, KDHE was able to gather additional radon gas measurement data. Additionally, KDHE worked across agencies to obtain geological maps that help assess the parts of the state where environmental exposures to radon are most likely to be severe.

This information will allow KDHE to continue to **promote testing and remediation to protect Kansas families** from the health effects of radon gas.

The radon program also administers the **Radon Licensing Law** in Kansas that ensures residents that companies hired to test for or remediate radon hazards in homes in Kansas are properly trained in the work practices that they perform.

Average Indoor Radon Measurements with Respect to the Surficial Geology of Kansas



Preventing chronic disease and injury in Kansas

Chronic diseases such as heart disease, stroke, diabetes and cancer, are the most common and costly of all health problems, but they are also the most preventable. Four **modifiable behaviors**—tobacco use, insufficient physical activity, poor eating habits, and excessive alcohol use—are **responsible for much of the illness, disability and premature death** related to chronic diseases. The KDHE Bureau of Health Promotion (BHP) works to reduce Kansans' risk of chronic conditions better manage their conditions.

Tobacco use is the single most preventable cause of disease, disability and death in Kansas and is linked to nearly all chronic diseases. Smoking cessation has major and immediate health benefits. During SFY15 the Tobacco Use Prevention Program launched a free online training for health care providers to help their patients who want to quit tobacco by integrating brief tobacco interventions into routine clinical care. **More than 190 Kansas providers participated in the training, referring nearly 600 patients to the free Kansas Tobacco Quitline counseling.**

Evidence-based, self-management education programs significantly help people with chronic diseases. During SFY15, the Community-Clinical Linkages Program coordinated a network that expanded to 133 class leaders who conduct **chronic disease and diabetes self-management classes for more than 2,000 Kansans.** Participants report significant improvements in exercise,

Farmer's Markets are integral to regional food systems, economies and social networks that contribute to better health.

- In 2015, the state partnered with **148 farmer's markets in 77 cities** in Kansas.
- The Senior Farmer's Market Nutrition Program reached **27 percent of the eligible senior population.**

ability to do activities, reduction in symptoms, increased ability to manage their condition, and less depression, fear and frustration. In 2015, BHP began developing a statewide Diabetes Primary Prevention (DPP) network. Several communities are now offering DPP classes to help Kansans who have been diagnosed with prediabetes or are at risk for diabetes.

Motor vehicle crash injuries and deaths, and their associated costs, are preventable through proven, effective strategies such as child passenger safety seat distribution and education programs. In SFY15, the Safe Kids Kansas Buckle Up Program **checked 1,665 child safety seats** at 152 local events and **distributed 792 child safety seats** and booster seats to low-income families. The Buckle Up Program

has been **credited with saving 36 lives** in Kansas since it was implemented in 1998.

The Early Detection Works (EDW) program partners with over 300 Kansas providers to offer free breast and cervical cancer screening services to women who qualify.

- In 2015, EDW screened almost **6,200 high risk, low income women.**
- Since 1996, EDW providers have diagnosed **992 cervical cancers and 701 breast cancers** in Kansas women.

Quality Improvement: Pathway for Excellence

The KDHE Quality Improvement (QI) Council has been established and has produced a QI Plan for the agency. The Plan provides guidance for all KDHE staff to use when implementing QI Projects to **improve efficiencies in their programs and services**. The implementation of the Plan will link together the State Health Improvement Plan, KDHE Strategic Plan and the Public Health Accreditation Board's (PHAB) Standards and Measures. It will also be closely linked to the KDHE Workforce Development Plan. The KDHE QI Plan describes an approach to managing performance and quality improvement across the agency. The QI Plan also provides guidance on the **best-practices for quality-focused processes and activities** for use throughout the agency. When implemented in a collective and coordinated effort, the QI Plan is designed to ensure that quality public health services are provided across all programmatic and administrative areas, and are consistently improved to meet customer and stakeholder needs.

KDHE completed the application to become a Public Health Accreditation Board (PAHB), Accredited State Health Department in December of 2015. This application process involved gathering documents from all parts of KDHE that demonstrate successful achievement of the PHAB Standards and Measures. Accreditation standards define the expectation for health departments to **continually improve service, value and accountability**. KDHE will be visited by site evaluators in 2016 to complete the Accreditation process.



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